FORM D

SEC 1972 (6/02):
Potential persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1371077

OMB APPROVAL
OMB Number: 3235-0076



DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)							
Unit Offering							
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE						
Type of Filing: New Filing Amendment							
A. BASIC IDENTIFICATION DATA							
1. Enter the information requested about the issuer							
Name of Issuer (check if this is an amendment and name has changed, and indicate	change.)						
DriverConnection.net, LLC							
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
8064 130 th Avenue NE, Kerkhovan, Minnesota 56252	(320) 894-1866 PECEIVED C						
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
(if different from Executive Offices)	() \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Brief Description of Business	2006						
Establish and host website related to the trucking industry.							
Type of Business Organization	TO SECTION						
☐ corporation ☐ limited partnership, already formed ☐ ☐	other (please specify).						
☐ business trust ☐ limited partnership, to be formed Li	mited liability company						
Month Year							
Actual or Estimated Date of Incorporation or Organization: [0] [4] [0] [6]	Actual Estimated						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrev	viation for State: PROCESCE						
CN for Canada; FN for other foreign jurisdiction)	[M] [N]						
GENERAL INSTRUCTIONS	I AUG 0 2 2000						
Federal:							
Who Must File: All issuers making an offering of securities in reliance on an exemption							
230 501 et seg. or 15 U.S.C. 77d(6)	F MARIOTA						

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

•	Each general and m		corporate issuers and of c partnership issuers.	orporate general and man	aging partners of pa	arthership issuers; and
Checl	Box(es) that Apply:	Promoter	⊠ Beneficial Owner		⊠ Governor	General and/or Managing Partner
Full N	lame (Last name first,	if individual)				· · · · · · · · · · · · · · · · · · ·
Alan	Ruchti					
		· ·	Street, City, State, Zip Coo	de)		
8064	130 th Avenue NE, Kerl	AND A COLUMN TO THE COLUMN TO	The state of the s			
Check	Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full	lame (Last name first,	if individual)	e e e e e e e e e e e e e e e e e e e	ATTACHER TO THE STATE OF THE ST		
Busin	ess or Residence Addr	ess (Number and S	Street, City, State, Zip Coo			
Check	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full N	Jame (Last name first,	if individual)				
Busin	ess or Residence Addr	ess (Number and S	Street, City, State, Zip Coo	de)		
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Füll N	lame (Last name first,	if individual)				
Busin	ess or Residence Addr	ess (Number and S	Street, City, State, Zip Coo	le)		
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full N	lame (Last name first,	if individual)				
Busin	ess or Residence Addr	ess (Number and S	Street, City, State, Zip Cod	le)		
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (Last name first,	if individual)				
Busin	ess or Residence Addr	ess (Number and S	Street, City, State, Zip Cod	le)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. IN	FORMAT	TON AB	OUT OFF	ERING				
1. Has the	issuer sol	d, or does	the issuer	intend to	sell, to nor	ı-accredite	ed investor	s in this of	fering?		Yes ⊠	No
			Ans	swer also i	in Appendi	ix, Colum	n 2, if filin	g under U	LOE.			
2. What is	2. What is the minimum investment that will be accepted from any individual?											
3. Does th	Does the offering permit joint ownership of a single unit?											
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the											
			listed is a									
			s, list the ma a broker or									
Full Name					ou may ser	101th the	illioilliatio	ii ioi uiai i	JIOKEI OI U	leater only	' <u>•</u>	
Not applica	•	e msi, n	marviduai)									
Business of		e Address	(Number	and Street	t, City, Sta	te, Zip Co	de)					
Name of A	ssociated	Broker or	Dealer						- ,			
· ·	· - · · ·								· · · · · · · · ·			
States in W												
			individual	-								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last nam	e first, if i	individual)									
Business or	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)	 			. <u> </u>	
Name of A	ssociated 1	Broker or	Dealer									
States in W	hich Perso	on Listed	Has Solicit	ed or Inte	nds to Soli	icit Purcha	asers					
			individual								\Box	All States
`[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	ſΜΟ
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last nam	e first, if i	ndividual)									
Business or	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)					
Name of A	ssociated l	Broker or	Dealer									
States in W	hich Perso	on Listed	Has Solicit	ed or Inte	nds to Soli	cit Purcha	isers	 .				
(Check "A	All States"	or check	individual	States)								All States
`[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity	10,000,000.00	\$ 10,00,000.00
	Common Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests		\$
	•	S	\$ \$
		10,000,000.00	\$ 10,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	10,000,000,00	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors	3	\$125,000
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	T C	Dellas Assessed
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	\$
	-		¢
	Regulation A		φ
	_		\$
	Total		2
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	П	\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 20,000
	Accounting Fees		\$
	•	7	ψ
	Engineering Fees		Φ
	Sales Commissions (specify finders' fee separately)	님	\$
	Other Expenses (identify)		3
	Total	1 1	20

	 b. Enter the difference between the C - Question 1 and total expenses furn difference is the "adjusted gross proceed 		a. This		\$ <u>9,980,000.00</u>
5.	Indicate below the amount of the adjuste be used for each of the purposes show furnish an estimate and check the box to listed must equal the adjusted gross prod Question 4.b above.	n. If the amount for any purpose is no the left of the estimate. The total of the	ot known, payments		
				Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		🗍 \$,	□\$
	Purchase of real estate		□ \$_		□ \$
	Purchase, rental or leasing and ins	stallation of machinery and equipment	🗆 s –		
		uilding and facilities			□ \$
		ncluding the value of securities involved			
		n exchange for the assets or securities			
		rger)	🔲 \$_		_ 🗆 \$
	Repayment of indebtedness		🗆 \$_		_ 🗆 \$
	Working capital		🗆 \$_		⊠ \$ <u>8,380,000</u>
	Other (specify): Technology develo	opment, marketing, and administrative	\$_		□ \$ 1,050,000
	expenses.		_		
			_ □\$_		_ 🗆 \$
	Column Totals		🗆 🖫		S 9,980,000
	Total Payments Listed (column to	tals added)		\boxtimes	9,980,000
		D. FEDERAL SIGNATURE			
the f w ri tt	issuer has duly caused this notice to be signature constitutes an undertalen request of its staff, the information fur. 502.	king by the issuer to furnish to the U.S	. Securitie	s and Exchar	nge Commission, upon
Issue	er (Print or Type)	Signature (1)		Da	nte
Driv	erConnection.net, LLC	OHK./			-14-06
	e of Signer (Print or Type)	Title of Signer (Print or Type)			7 (
Nam		Chief Executive Officer			

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations (See 18 IJ S.C. 1001)

200	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the lersigned duly authorized person.
Iss	Date Signature Date Dat
n.	July 24

Title of Signer (Print or Type)

Chief Executive Officer

Instruction:

Name of Signer (Print or Type)

Alan Ruchti

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to accredite in	sell to non-d investors State 8-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	LLC Units	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL	1 2 3	1	225 0						1.0	
AK									<u> </u>	
AZ						 				
AR										
CA									<u> </u>	
СО							 			
CT								 		
DE							· · · · · · · · · · · · · · · · · · ·			
DC										
FL										
GA	, ,						!			
н										
ID										
IL										
IN										
IA										
KS										
KY							!			
LA										
ME										
MD										
MA										
MI		X	\$10,000,000		\$25,000	1			X	
MN		X	\$10,000,000		\$50,000	1			X	
MS										
МО										

APPENDIX

1	accredite in	sell to non- d investors State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
OK								<u> </u>	
OR									
PA									
RI									
SC							! !		
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI		X	\$10,000,000		\$50,000	1			X
WY									
PR									